

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

SEP 11 ZUUB

## FORM D

OMB APPROVAL

OMB Number: 3235-0076

Expires: June 30,2008

Estimated average burden hours per response.....16.00

Washington, DC ~ 101 NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY						
Prefix	Serial					
DA	TE RECEIVED					
	1					

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)	· · · · · · · · · · · · · · · · · · ·
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4( Type of Filing: New Filing Amendment	6) D ULOE PROCESSEL
A. BASIC IDENTIFICATION DATA	SEP 1 8 2008
1. Enter the information requested about the issuer	TUOMOON
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.) HG Food, LLC	THOMSON REUTE
Address of Executive Offices (Number and Street, City, State, Zip Code) 1000 Homemade Way, Canton, Texas 75103	Telephone Number (Including Area Code)
Address of Principal Business Operations (Number and Street, City, State, Zip Code (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
business trust   limited partnership, to be formed	timated tee: 08059836
GENERAL INSTRUCTIONS	·
Federal:  Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation I 77d(6).	O or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offerir and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given which it is due, on the date it was mailed by United States registered or certified mail to that address.	
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C.	20549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manual photocopies of the manually signed copy or bear typed or printed signatures.	ally signed. Any copies not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only repthereto, the information requested in Part C, and any material changes from the information previously supnot be filed with the SEC.	
Filing Fac: There is no federal filing fee	

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

			A. BASIC IDE	ΝTΙ	ICATION DATA	73			
2. Enter the information re	quested for the fol	lowin	g:						
Each promoter of to	the issuer, if the iss	uer h	as been organized wi	thin t	the past five years;				
<ul> <li>Each beneficial ow</li> </ul>	ner having the pow	er to v	ote or dispose, or dir	ect th	e vote or disposition (	of, 10	% or more o	f a clas	s of equity securities of the issuer.
<ul> <li>Each executive off</li> </ul>	icer and director of	f corp	orate issuers and of	согро	rate general and man	aging	partners of	partne	rship issuers; and
<ul> <li>Each general and r</li> </ul>	nanaging partner o	f parti	nership issuers.						
Check Box(es) that Apply:	Promoter	V	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)								
Business or Residence Addre 2100 McKinney Ave., Su			t, City, State, Zip Co 75201	de)	-				
Check Box(es) that Apply:	Promoter	7	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i Homemade Gourmet, Inc	·								
Business or Residence Addre	•		t, City, State, Zip Co	de)		····			
Check Box(es) that Apply:	Promoter	Ø	Beneficial Owner	Z	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i Johnsen, Kenneth R.	if individual)		······································				<u> </u>		
Business or Residence Addre	ss (Number and	Street	t, City, State, Zip Co	de)					
2100 McKinney Ave., Sui	te 1550, Dallas,	TX 7	75201						
Check Box(es) that Apply:	Promoter	Z	Beneficial Owner	Ø	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)	-	·		<del></del>				
Business or Residence Addre	ss (Number and	Street	t, City, State, Zip Co	de)					
1000 Homemade Way, 0	-			•					
Check Box(es) that Apply:	Promoter	Ø	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, MVPS, LLC	f individual)								
Business or Residence Addre 2100 McKinney Ave., Su				de)					
Check Box(es) that Apply:	Promoter	Ø	Beneficial Owner	Ø	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i Himelfarb, John, Preside									
Business or Residence Address 1000 Homemade Way, 6			i, City, State, Zip Co	dc)					
Check Box(es) that Apply:	Promoter	V	Beneficial Owner	Z	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i Harris, Kelly	f individual)								
Business or Residence Addre 1000 Homemade Way, C			t, City, State, Zip Co	de)					

الله الله الرئيسة				<b>建筑</b>	В. П	NFORMAT	ION ABOU	T OFFERI	NG				
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?										Yes	No 🕱		
Answer also in Appendix, Column 2, if filing under ULOE.									Ľ	į.			
2.										***************************************	s		
												Yes	No
3.			permit join		-							R	
4,	commis If a pers or state	ssion or sim son to be lis s, list the na	tion request ilar remune ited is an ass ame of the b , you may s	ration for : sociated pe roker or d	solicitation erson or ago caler. If mo	of purchasent of a broker ore than five	ers in conn (er or deale c (5) persor	ection with r registered as to be list	sales of sec d with the S ed are asso	curities in t EC and/or	he offering. with a state		
Ful	l Name (	Last name	first, if indi	ividual)									
Bu	siness or	Residence	Address (N	umber an	d Street, C	ity, State, 2	Lip Code)	<del></del>	<del></del>				
Na	me of As	sociated Bi	roker or De	aler				<del> </del>		···········			<del></del>
Sta	tes in Wi	nich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	s" or check	individua	States)	*************	******	***************		***************************************	***************************************	☐ Al	l States
	AL IL MT RI	AK IN NE SC	IA NV SD	KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK W1	MS OR WY	MO PA PR
Ful	1 Name (	Last name	first, if indi	vidual)							• •		
Bu	siness or	Residence	: Address (1	lumber an	id Street, C	ity, State,	Zip Code)						<u>.                                    </u>
Nai	me of As	sociated Bi	oker or De	aler	<del></del>								
Sta	tes in Wi	nich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	s" or check	individual	States)			***************************************		•••••	***************************************	☐ Al	l States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Ful	l Name (	Last name	first, if indi	vidual)		•	<u>.</u>						
Bu	siness or	Residence	Address (1	Vumber an	d Street, C	lity, State,	Zip Code)		<del>· • • • • • • • • • • • • • • • • • • •</del>	·			
Nai	ne of As	sociated Br	oker or Dea	aler	<del></del>				· · · · · · · · · · · · · · · · · · ·	<del>,</del> -			<del></del>
Sta	tes in Wh	nich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers			<b></b>		<del></del>	
	States in Which Person Listed Has Solicited or Intends to Solicit Purchasers  (Check "All States" or check individual States)								☐ All	l States			
	AL IL MT RI	AK IN NE SC	AZ TA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

## C. OFFERING PRICE: NUMBER OF INVESTORS EXPENSES AND USE OF PROCEEDS.

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security	Aggregate Offering Price		Amount Already Sold
	Debt	0.00		s 0.00
	Equity			\$ 0.00
	Common Preferred			
	Convertible Securities (including warrants)	1,675,000.0	00	1,675,000.00 \$
	Partnership Interests			\$_0.00
	Other (Specify)	0.00		\$ 0.00
	Total		0	\$ 1,675,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number		Aggregate Dollar Amount
	A 197 A 2	Investors		of Purchases \$ 1,675,000.00
	Accredited Investors		-	
	Non-accredited Investors			\$
	Total (for filings under Rule 504 only)	19	-	\$ 1,075,000.00
3.	Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.			
		Type of		Dollar Amount
	Type of Offering	Security		Sold
	Rule 505		-	\$
	Regulation A		-	\$
	Rule 504		-	\$
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		-	\$ 0.00
	Transfer Agent's Fees	[		s
	Printing and Engraving Costs		]	<b>s</b>
	Legal Fees		<u> </u>	<b>5</b> 7,500.00
	Accounting Fees		_	s
	Engineering Fees	Г	j	s
	Sales Commissions (specify finders' fees separately)	[	_	s
	Other Expenses (identify)	F	_	S
	Total	-	_	• 7.500.00

	C. OFFERING PRICE: NU	MBER OF THE STORS EXPENSES AND	USE;OF PROCLEDS	
	b. Enter the difference between the aggregate of and total expenses furnished in response to Part C-proceeds to the issuer."	-Question 4.a. This difference is the "adju	isted gross	\$1,667,500.00
5.	Indicate below the amount of the adjusted gross each of the purposes shown. If the amount for check the box to the left of the estimate. The total proceeds to the issuer set forth in response to P	any purpose is not known, furnish an est of the payments listed must equal the adju	imate and	
	·		Payments to	
			Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		<u>\$ 0.00</u>	s_0.00
	Purchase of real estate		\$_0.00	\$ 0.00
	Purchase, rental or leasing and installation of m		s 0.00	s 0.00
	Construction or leasing of plant buildings and f	acilities		s 0.00
	Acquisition of other businesses (including the v		<b>_</b>	
	offering that may be used in exchange for the assister pursuant to a merger)	ssets or securities of another	O.00	<b>s</b>
	Repayment of indebtedness			s
	Working capital			5 1,667,500.0
	0.1 ( '6')			□\$ 0.00
	(op )			- U *—
				s
	Column Totals			<u> 1,667,500.0</u>
	Total Payments Listed (column totals added)		s_1	667,500.00
		DEFEDERAL SIGNATURE		
igr	issuer has duly caused this notice to be signed by the ature constitutes an undertaking by the issuer to finformation furnished by the issuer to any non-ac	urnish to the U.S. Securities and Exchang	e Commission, upon writte	ule 505, the following on request of its staff,
ssu	er (Print or Type)	Signartyre////	Date	
HG	Food, LLC	1 /4/// V	September	r 10, 2008
Jan	ne of Signer (Print or Type)	Title of Signer (Print or Type)		
		Manager of the Issuer's Manager		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	a le state signature			ŝ
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification	Yes	No	
	provisions of such rule?		X	

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
HG Food, LLC		June 12, 2008
Name (Print or Type)	Title (Print or Type)	
Kenneth R. Johnsen	Manager of the Issuer's Manager	

## Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

	APPENDIX										
1	Intend to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	4 investor and rchased in State C-Item 2)		under Sta (if yes, explana	ification ate ULOE attach ation of granted)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
AL									×		
AK											
AZ											
AR											
CA											
со											
СТ											
DE											
DC											
FL											
GA											
ні											
ID											
IL		×	convt.note 1.675m	2	\$50,000.00	0	\$0.00		×		
IN											
IA											
KS											
KY											
LA											
ME											
MD											
МА		×	convt.note 1.675m	1	\$50,000.00	0	\$0.00		×		
MI											
МИ											
MS											

	in a company			APP	ENDIX":				
1	Intend to non-a investor	i to sell accredited is in State	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	(Part E-	No
мо			· · · · · · · · · · · · · · · · · · ·						
МТ									
NE									
ΝV									
NH									
lи									
NM								<u></u>	
NY		×	convt.note\$1.675m	1	\$50,000.00	0	\$0.00		×
NC									
ND		<u>.</u>							
ОН									
ок		×	convt.note\$1.675m	2	\$175,000.0	0	\$0.00		×
OR									
PA									
RI									
sc									
SD									
TN									
TX		×	convt.note\$1.675	13	\$1,125,000.	0	\$0.00		×
UT									
VT									
VA									
WA									
wv									
WI				-					

				APP	ENDLX			िल्डामी स्टिन्स बेटा ४८० ट	
**	to non-a investor	2 I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		4  Type of investor and amount purchased in State  (Part C-Item 2)				
State WY	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
PR									

